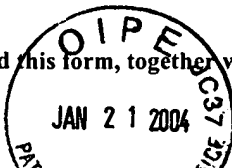


**PART B - FEE(S) TRANSMITTAL**

Complete and send this form, together with applicable fee(s), to: Mail

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**Commissioner for Patents**  
**P.O. Box 1450**  
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**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence regarding the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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7590

11/14/2003

**BRET E. FIELD**  
**BOZICEVIC, FIELD & FRANCIS LLP**  
**200 MIDDLEFIELD ROAD**  
**SUITE 200**  
**MENLO PARK, CA 94025**

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<b>Express Mail NO.</b>	(Depositor's name)
<b>EV333998503US</b>	(Signature)
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/897,390	07/21/1997	Matthew Lavail	REG-32	4393

**TITLE OF INVENTION: PREVENTION OF RETINAL INJURY AND DEGENERATION BY SPECIFIC FACTORS**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	02/17/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
HAYES, ROBERT CLINTON	1647	514-200000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Paula A. Borden  
Bozicevic, Field &  
 2 Francis, LLP  
 3 \_\_\_\_\_

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Regents of the University of California, CA Oakland, CA  
 Regeneron Pharmaceuticals, Inc. Tarrytown, NY

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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- ☒ Advance Order - # of Copies 10

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- ☐ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0815 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Paula A. Borden (Date) 01/21/2004  
 Paula A. Borden (Reg. No. 42,344)

01/28/2004 HAL122 00000025 500815 08897390

01 FC:1501 1330.00 DA  
 02 FC:8001 30.00 DA

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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**DATE: January 21, 2004**

**EV333998503US**

**THE EXPRESS MAIL NUMBER OF THE DAY IS: EV333998503US**

**The person taking the Express Mail to the Post Office is: Mike Dakan**

**EXPRESS MAIL CERTIFICATION**

Date of Deposit: **01/21/2004** I hereby certify that the below-listed papers or fees were inserted into a package addressed to: Commissioner for Patents, PO BOX 1450, Alexandria, Virginia 22313-1450 and was deposited by me with the United States Postal Service "Express Mail Post Office Addressee" service under 37 C.F.R. § 1.10 on the date indicated above.

Signature Mike Dakan

Date 1/21/04.

Atty. Docket No.	Serial Number	Description	Atty.	Fee
STAN-215US2	10/753,962	Transmittal, Preliminary Amendment	BEF	
UCAL-275	10/444,633	Transmittal, Copy of Incomplete Reply, Petition for a 4 Month Extension of Time <i>in duplicate</i>	PAB	\$685
CORA-003	10/105,804	IDS, SB08A, Copy of Intl. Search Report, Copies of (2) Cited Reference	BEF	
STAN-203	09/627,643	Transmittal, PTOL-85B <i>in duplicate</i> , (9) sheets of Figures	PAB	\$1,330
UCAL-250CON4	08/897,390	PTOL-85B <i>in duplicate</i>	PAB	\$1,330
BDWP-001CON	10/280,833	Transmittal, Fee Transmittal <i>in duplicate</i> , Restriction Election (Petition for a 1 Month Extension of Time)	PAB	\$110
BEAR-008	09/700,696	Transmittal, Amendment	KYB	
PALX-008CON	10/703,738	Transmittal, IDS, SB08A	FPB	
SEEK-001CIP	09/952,744	Transmittal, Fee Transmittal <i>in duplicate</i> , Response to Office Action, Terminal Disclaimer, (5) Copies of References	PJS	\$55

